

TECH CENTER 1600 2900

PETITION FOR EXTENSION OF T	33990-068660.0115	
	In re Application of Edwards	
	Application Number 09/680,738	Filed 10:06:00
	For ADJUSTABLE SENSITIVITY	
	Group Art Unit 1636	Examiner B. Loeb
This is a request under the provisions of reply in the above identified application.		r filing a
The requested extension and appropriate (check time period desired):	non-small-entity fee are as follows	
One month (37 CFR 1.17(a)	(1))	\$
✓ Two months (37 CFR 1.17(a)))(2))	\$_ <u>400</u>
Three months (37 CFR 1.17	(a)(3))	\$
Four months (37 CFR 1.17(a	a)(4))	\$
Five months (37 CFR 1.17(a		\$
above is reduced by one-half, and A check in the amount of the fee is Payment by credit card. Form PTC The Commissioner has already be application to a Deposit Account. The Commissioner is hereby author credit any overpayment, to Deposit have enclosed a duplicate copy of a population or credit any policant/inventor assignee of record of the	s enclosed. D-2038 is attached. Sen authorized to charge fees in this prized to charge any fees which may be osit Account Number 02-4377 of this sheet. e entire interest. See 37 CFR 3.71. CFR 3.73(b) is enclosed. (Form PTO/S ord.	required,
Registration number if a	cting under 37 CFR 1.34(a)	
WARNING: Information on this for be included on this form. Provide	m may become public. Credit card in credit card in credit card information and authoriza	formation should not ation on PTO-2038.
8/9/02 	Signa	Add A
PTO Reg No.: 48,861	Michelle LeC	Cointe
		d or printed name
NOTE: Signatures of all the inventors or assignees forms if more than one signature is required, see by	of record of the entire interest or their representa elow.	tive(s) are required. Submit multiple
Total offorms are submitted	J.	

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(Application Numbe	09/680,738	
TRANSMITTAL FORM		Filing Date	10/06/00	RECEIVED
		First Named Invent	Edwards	AUG 1 4 002
(to be used for a	all correspondence after initial film	ng) Group Art Unit	1636	OM GENT ER 1600 2900
		Examiner Name	B. Loeb	
Total Number	of Pages in This Submission	Attorney Docket Num	nber 33990-068660.0115	
	E	NCLOSURES (che	ck all that apply)	
Extension of Time I Express Abandonn Information Disclos Certified Copy of P Document(s) Response to Missii Incomplete Applica	rm d d y eclaration(s) Request ment Request sure Statement riority Remark ng Parts/	ssignment Papers or an Application) rawing(s) idensing-related Papers etition etition to Convert to a rovisional Application ower of Attorney, Revocation hange of Correspondence ddress erminal Disclaimer dequest for Refund CD, Number of CD(s)	After Allowance Commuto Group Appeal Communication of Appeals and Interfere Appeal Communication (Appeal Notice, Bnef. Reply Bne Proprietary Information Status Letter Other Enclosure(s) (ple identify below):	to Board ences to Group
<u> </u>		DRUGANT ATTORNEY	D ACENT	
Firm	BakerBotts LLP	APPLICANT, ATTORNEY, C	A A GLINI	
or Individual name				
Signature	Mulli	Att Nam PTO Re		
Date	8/9/02			
	CERT	IFICATE OF MAILING		
I hereby certify that this commail (EV141765227) in an	rrespondence is being deposited envelope addressed to: Commis	with the United States Postal S sioner for Patents, Washington	service with sufficient postage as E , DC 20231 on this date: 8/9/02	xpress
Typed or printed nam	e Shannon Judice			
Signature	٠	1- L L	Date 8/9/02	

28-12-00

BAKER BOTTS LLP

AUG 1 4 1002

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT (\$) 200

	TECH CENTER	1800 2007
Co	omplete if Known	1000 2500
Application Number	09:680.738	1
Filing Date	10/06/00	
First Named Inventor	Edwards	1
Examiner Name	B. Loeb	
Group Art Unit	1636	
Attorney Docket No.	33990-068660.0115	<i>)</i>

METHOD OF PAYMENT	DD OF PAYMENT FEE CALCULATION (continued)			
The Commissioner is hereby authorized to charge	3. ADDITION	IAL FE	ES	
1 indicated fees and credit any overcayments to	Large	Smal		
Deposit Account Number 12-4377	Entity Fee (\$)	Entity Fee (\$)	y Fee Description	Fee Paid
Deposit Account Baker Botts LLP	130	65	Surcharge - late filing fee or oath	
Name Charge Any Additional Fee Required	50	25	Surcharge - late provisional filing fee or cover sheet	
Under 37 CFR 1.16 and 1.17	130	130	Non-English specification	
Applicant claims small entity status. See 37 CFR 1 27	2,520	2.520	For filing a request for ex parte reexamination	
2. Payment Enclosed: Check Credit card Money Other	920*	90'0*	Requesting publication of SIR prior to Examiner action	
Check Credit card Creer Other	1,340*	1 840*	Requesting publication of SIR after Examiner action	
	1.0	55	Extension for reply within first month	200
1. BASIC FILING FEE	400	200	Extension for reply within second month	200
Large Entity Small Entity Fee Fee Fee Description	920	460	Extension for reply within third month	
(\$) (\$) Fee Paid	1,440	720	Extension for reply within fourth month	
740 370 Utility filing fee	1,960	980	Extension for reply within fifth month	
330 165 Design filing fee	320	٠٠, ١	Notice of Appeal	
510 255 Plant filing fee	320	160	Filing a brief in support of an appeal	
740 370 Reissue filing fee	230	140	Request for oral hearing	
160 & Provisional filing fee	1,510	1,510	Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 0	110	55	Petition to revive - unavoidable	
2. EXTRA CLAIM FEES	1 280	540	Petition to revive - unintentional	
Fee from Extra Claims below Fee Paid	1 280	640	Utility issue fee (or reissue)	
Total Claims 13 . 20 0 x = 0	460	230	Design issue fee	
Independent 1 . 3 ** = 0 x = 0	620	310	Plant issue fee	
Claims Multiple Dependent	130	130	Petitions to the Commissioner	\vdash
·	50	50	Processing fee under 37 CFR 1.17(q)	
Large Entity Small Entity	180	180	Submission of Information Disclosure Stmt	
Fee Fee Fee Description (\$) (\$) 18 9 Claims in excess of 20	40	40	Recording each patent assignment per property (times number of properties)	
84 42 Independent claims in excess of 3	740	370	Filing a submission after final rejection (37 CFR § 1.129(a))	
280 14() Multiple dependent claim, if not paid	740	370	For each additional invention to be	
84 42 ** Reissue independent claims over original patent	746	370	examined (37 CFR § 1.129(b)) Request for Continued Examination (RCE)	
18 9 ** Reissue claims in excess of 20 and over original patent	. 740 900	900	Request for expedited examination	
(6) 0	Other fee (sne	nifv)	of a design application	
SUBTOTAL (2)	*Reduced by E		(\$) 20	00
**or number previously paid, if greater; For Reissues, see above	Reduced by t	Jasic I III.I	9.55.55	

AUGUSTED DV				Complete (if applicable)	
Name (Pnnt Type)	Michelle LeCointe	Registration No (Attorney Agent)	48.861	Telephone	512.322.2580
Signature	Michelle Leggonite	(Atlantey Agent)		Date	8/9/02